## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09892385

| (Column 1) (Column 2)       |  |  |                           |              |                              |   |            | SMALL ENTITY        |                        |               | OTHER THAN OR SMALL ENTITY |   |
|-----------------------------|--|--|---------------------------|--------------|------------------------------|---|------------|---------------------|------------------------|---------------|----------------------------|---|
| TOTAL CLAIMS                |  |  | )                         |              |                              |   |            | RATE                | FEE                    |               | RATE                       | FEE                                     |
| FOR                         |  |  | NUMBER FILED              |              | NUMBER EXTRA                 |   |            | BASIC FEE           | 355.00                 | OR            | BASIC FEE                  | ·710.00                                 |
| TOTAL CHARGEABLE CLAIMS     |  |  | minus 20=                 |              | · 8                          |   |            | X\$ 9=              |                        | OR            | X\$18=                     |   |
| INDEPENDENT CLAIMS          |  |  | minus 3 =                 |              | y                            |   |            | X40=                |                        | OR            | X80=                       |   |
| MU                          | LTIPLE DEPEN   | DENT CLAIM PR  | RESENT                    |              |                              |   |            | +135=               |                        | OR            | +270=                      |   |
| * If                        | the difference                                       | in column 1 is   | less than zero, enter "0" |              |                              | olumn 2                                 |            | TOTAL               |                        | OR            | TOTAL                      | 710                                     |
| CLAIMS AS AMENDED - PART II |  |  |                           |              |                              |   |            |                     |                        |               | OTHER THAN                 |   |
| -                           |  | (Column 1)   | (Colum                    |              |                              | (Column 3)                              |            | SMALL E             |                        | OR            | SMALL                      |   |
| AMENDMENT A                 |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                           | PREVI        | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA                        |            | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE                  |
|                             | Total  | *  | Minus                     | **           |                              | = .                                     |            | X\$ 9=              |                        | OR            | X\$18=                     |   |
|                             | Independent  | *  | Minus                     | ***          |                              | =                                       |            | X40=                |                        | OR            | X80=                       |   |
| Ĺ                           | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM       |  |                           |              |                              |   |            |                     |                        | OR            | +270=                      |   |
|                             |  |  |                           |              |                              |   |            | TOTAL<br>ADDIT. FEE |                        | OR            | TOTAL<br>ADDIT. FEE        |   |
|                             |  | _ ′  |                           |              |                              | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |            |                     |                        |               |                            |   |
| AMENDMENT B                 |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                      |                           | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                        |            | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                       | ADDI-<br>TIONAL<br>FEE                  |
|                             | Total  | *  | Minus                     | **           |                              | =                                       |            | X\$ 9=              |                        | OR            | X\$18=                     |   |
| ME                          | Independent  | *  | Minus                     | ***          |                              | =                                       | ] [        | X40=                |                        | OR            | X80=                       |   |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM       |  |                           |              |                              |   | <b>ا</b> ا | +135=               |                        |               | +270=                      | *************************************** |
|                             |  |  |                           |              |                              |   | L          | TOTAL               |                        | OR<br>OR      | TOTAL                      |   |
| ADDIT. F                    |  |  |                           |              |                              |   |            |                     |                        | ON            | ADDIT. FEE                 |   |
| Ī                           |  | (Column 1)<br>CLAIMS   |                           | HIGH         | mn 2)<br>HEST                | (Column 3)                              | h r        |                     | ADDI-                  | 1             |                            | ADDI-                                   |
| AMENDMENT C                 |  | REMAINING<br>AFTER<br>AMENDMENT                                |                           | PREV         | MBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA                        |            | RATE                | TIONAL                 |               | RATE                       | TIONAL<br>FEE                           |
|                             | Total  | *  | Minus                     | **           |                              | =                                       |            | X\$ 9=              |                        | OR            | X\$18=                     |   |
|                             | Independent  | *  | Minus                     | ***          |                              | =                                       | ┨╏         | X40=                |                        | OR            | X80=                       |   |
| L                           | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= |  |                           |              |                              |   |            |                     |                        |               | +270=                      |   |
| •                           | If the entry in colu                                 | ımn 1 is less than t   | he entry in colu          | ımn 2, writ  | te "0" in co                 | lumn 3.                                 |            | TOTAL               |                        | OR            | TOTAL                      |   |
| **1                         | If the "Highest Nu                                   | imber Previously P<br>imber Previously P<br>nber Previously Pa | aid For" IN TH            | S SPACE      | is less tha                  | an 3, enter "3."                        | ,          | ADDIT. FEE          | propriate bo           | OR<br>x in co | ADDIT. FEE                 |   |